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AUTHOR Beck, Terry F.; Yager, Geoffrey G.
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ABSTRACT

Most research on counselor training programs has focused on the trainee's responsive skills, while little research emphasis has been placed on the trainee's initiative dimensions that pave the way for more systematic action programs to help clients change their behavior. To examine various approaches to teaching one of the initiative skills, i.e., confrontation, 22 prepracticum counselors were assigned to one of three groups: a cognitive self-instructional modeling group, a Carkhuff discrimination/communication group, and a placebo control group. Results indicated that the two groups receiving confrontation rating training outperformed the control group, which merely received a labeling preparation. There were no differences between the self-instructional and communication/discrimination groups on any of the confrontational measures related to the role-played interview. The findings support the use of a behavioral teaching approach in the development of the advanced skill of confrontation. (Author/JAC)

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Three Models of Confrontation Skills Training for Prepracticum Counseling Students

Terry F. Beck

Kutztown State College

Geoffrey G. Yager

University of Cincinnati

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Running head: Three Models of Confrontation Skills Training

Twenty-two prepracticum counselors were assigned to one of three groups: (a) a cognitive self-instructional modeling group which taught students both a thinking process to generate confrontations and a method of evaluating their own responses, (b) a Carkhuff discrimination/communication group which provided a method to evaluate the group's confrontation, and (c) a placebo control group which learned only how to label various types of confrontations.

These groups were compared on written and role-played demonstrations of confrontation. Ratings of the frequency of confrontation, of the difficulty level of the existing confrontations, and of the quality of the confrontations were employed as criteria.

Results indicated that the two groups receiving confrontation rating training outperformed the group receiving merely a labeling preparation. There were no differences between the self-instructional and communication/discrimination groups on any of the confrontational measures related to the role played interview.

Three Models of Confrontation Skills Training for Prepracticum Counseling Students

Proponents of behaviorally-based skill training programs view counselor performance as a function of learned skills which can be behaviorally defined and which can be taught through application of the principles of learning theory. A variety of training programs have emerged which are based on learning principles such as modeling, shaping and reinforcement. Carkhuff's (1969a) didactic-experiential program, Ivey's (1971) microcounseling, Kagan's (1967) interpersonal process recall method, Danish and Hauer's (1973) helping skills program, and Hackney and Nye's (1973) programmed apporach all involve some combination of initial didactic teaching followed by modeling, roleplaying and practice with feedback.

While such skill training programs have demonstrated their ability to aid in the development of basic skills such as facilitation of communication and empathic understanding, there is a need to go beyond these "necessary but not sufficient" skills in order to encourage client change. Matarazzo (1978), in her review of counselor training programs, concluded that in addition to the basic skills, "the counselor needs skill in confronting and reassuring a client" (p. 962).

The training program that has generated the most research in basic skills is the integrated didactic-experiential training (IDET) program developed by Carkhuff (1969a, 1969b). He proposed that there are several relatively discrete skills involved in the counseling process and that these skills can be meaningfully grouped into responsive and initiative dimensions. Most of the research

on IDET has focused on the responsive skills, especially empathy, while relatively little research emphasis has been placed on the initiative dimensions such as confrontation, immediacy or interpretation. The understanding generated by the initiative mode is seen as important in that it paves the way for more systematic action programs which help clients to change their maladaptive behaviors.

The present research was designed to examine various approaches to teaching one of the initiative skills, confrontation. In this study, Cormier and Cormier's (1979) definition of confrontation was used: "a verbal response in which the counselor describes some discrepancy or distortion apparent in the client's message and behavior" (p. 82). Confrontation, then, is an active response initiated by the counselor and not simply a reaction to the client. The purpose or goal of a confrontation is to stimulate awareness and self-exploration by providing an external, objective, and undistorted assessment of discrepancies in the client's behavior.

Although relatively few studies have addressed the training of confrontation, those few present in the literature tend to support a structured approach for the teaching of this skill. For example, Rosenthal (1977) used modeling, role-playing, feedback and practice interviews in training confrontation. She found skill acquisition in written responses to vignettes, but she found no training effects in an interview with predetermined confrontation cues emitted by coached clients. Shea (1975) found that teaching confrontation through microcounseling was superior to an audiotaped training group in both frequency and type of confrontation. In general, the research on confrontation yields three conclusions: (a) the teaching of confrontation has often failed to report levels of competence; (b) there is little knowledge of the maintenance of this

skill beyond the initial training period; and (c) acquisition of the skill as evidenced by written responses has been more easily established than behavioral performance in real or simulated interviews.

The present study was designed to assess the effectiveness of three approaches to the training of beginning level counseling students in the confrontation response. The three approaches investigated included: (a) a control group that discussed types of confrontation and role-played with one another, (b) a discrimination/communication training group that practiced rating of various confrontations on a scale from 1-5 in addition to role-playing, and (c) a cognitive self-instructional modeling group that learned a set of questions that should be asked in preparation for a confrontation response. This self-instructional component was included in addition to role-playing and practicing rating confrontations on a 1-12 rating scale. It was anticipated that the two groups which received preparation in rating confrontations would be more confrontive than the control group which was only exposed to labeling confrontations. Additionally, the self-instructional group was expected to outperform the discrimination/communication group because they were taught a structured, cognitive method to employ in creating a confrontation.

Method

Subjects

The subjects in this study included 22 volunteer students enrolled in a Master's level prepracticum course. The class was skills-oriented, and the students had experienced 10 hours of empathy training prior to the confrontation treatment. The subjects were randomly assigned to three treatment groups:

placebo-control, discrimination/communication, and cognitive self-instructional modeling. Within each treatment group, subjects were randomly assigned to a smaller group of either three or four subjects. Advanced doctoral students were randomly assigned to lead one of these small groups.

Procedures

All subjects received 6 hours of training in confrontation over a 3 day period. On the first day of training all three groups listened to an audiotaped lecture on confrontation, followed by an audiotaped demonstration of confrontations used in hypothetical counseling interactions. The three groups listened to the same audiotape, but each group responded to the tape according to the training method characteristic of that group.

Placebo Control Training Group. This group listened to the audiotaped lecture on the first day of training, received additional instruction on 5 different types of confrontation (Berenson & Mitchell, 1974), and listened to the audiotaped demonstration. The training mode for this group consisted of three elements: (a) identifying discrepancies in client statements on the audiotape, (b) identifying the type of confrontation (e.g., didactic or experiential) used by the counselor on the tape, and (c) practicing written and verbal alternatives to the audiotaped confrontations.

The second day of training consisted of additional practice in responding to the audiotape followed by practicing confrontations with role-playing fellow students. The third day of training was devoted to additional role-playing with the students themselves making up the brief scripts containing discrepancies so as to provide opportunities for confrontations.

The control group was identical to the other two groups on each of the following dimensions: (a) total amount of treatment time, (b) modeling audiotapes reviewed, (c) stimulus audiotapes employed to generate confrontation responses and group discussion, and (d) the amount of role-play time allowed. They did not, however, receive any information on a method to evaluate (rate) their confrontation responses.

Discrimination/Communication Training Group. On the first day of training, this group also listened to the confrontation lecture. Next, this group received further instruction in discriminating among the five levels of confrontation on the Carkhuff Confrontation in Interpersonal Processes Scale. This was followed by listening to the audiotaped vignettes. The focus of the training for this group included: (a) identifying discrepancies in client statements, (b) rating the level of counselor confrontations (Carkhuff, 1969a) and (c) practicing written and verbal alternative responses to those examples used on the tape. This activity comprised the discrimination portion of the treatment.

The second day of training consisted of additional practice in discrimination by the subjects responding to the audiotape. This was followed by the communication portion of the treatment practicing confrontations with role-playing fellow students.

The third day of training for this group continued to emphasize communication of confrontations through role-plays developed by the students themselves.

Cognitive Self-instructional Modeling Training Group. The self-instructional group was patterned after Meichenbaum's (1977) self-instructional approach to clinical treatment. This method had been effectively applied to

the training of the basic-level communication skill of empathy (Beck, 1980; Ochiltree, Yager & Brekke, 1975; Yager & Beck, 1981), but it had not previously been implemented in the teaching of a more advanced-level counseling skill such as confrontation. After listening to the confrontation lecture of the first day, the self-instructional group received additional instruction in the self-instructional approach. A demonstration tape illustrated counselors modeling the process of "thinking aloud" that leads to a confrontation of client discrepancies. Six self-instructional questions were designed to structure the subjects' thinking so that relevant content and feelings of both the client and counselor would be considered prior to stating a confrontation. Additionally, these questions encouraged the subjects to weigh several important dimensions related to their decision to confront: (a) the quality of the counseling relationship, (b) the timing of the confrontation, and (c) the content, direction and time focus of the confrontation response. The self-instructional questions included: (a) What can I pat myself on the back for with regard to this counseling session? (b) What discrepancy might be identified in what the client has said/done? (c) Will the client benefit from a confrontation at the present time? (d) What should be the "content", the "direction", and the "time" for the confrontation response? (e) How do I feel right now? (f) What might my practice response be ("you say ...but")? The questions were practiced during role-plays, both out loud and in silence.

The training mode for this group consisted of identifying discrepancies in client statements, identifying the content, direction, and time focus of the counselor's response on the audiotape, and practicing written and verbal alternative responses to those used on the tape. The second day of training for this group included additional practice in responding to the audiotape and practice in talking through the self-instructional questions out loud while role-playing with

fellow students. The third day of training included practice in covertly asking self-instructional questions while formulating a confrontation response during student-generated role-play.

Instrumentation

Nine criterion measures were used in rating the students' learning after the confrontation skills training. The initial measurement was made during the last half hour of the training sessions: each group responded in writing to twelve written client statements (Rosenthal's Counseling Training Questionnaire, 1977, Form B). Thus, acquisition of the skill of confrontation was assessed through ratings of the subjects' written responses to this instrument.

Responses to the Counseling Training Questionnaire yielded four separate ratings: (a) total frequency of confrontation (i.e., statements of discrepancy); (b) average scores on the Response Relevance Scale (Beck, 1980; Yager & Beck, 1981) which have been previously shown to relate highly with Carkhuff's empathy rating (Yager & Beck, 1981); (c) average ratings for the Carkhuff Confrontation in Interpersonal Process Scale (Carkhuff, 1969b) which rates the confrontativeness of all responses on a 1 to 5 scale; and (d) average ratings (for those responses identified as confrontive) on the Multidimensional Confrontation Response Scale, an instrument developed for this study (See Appendix A) which essentially measures the difficulty level of a confrontation.

The same four ratings were made by two trained raters on transcripts of 25 minute audiotaped interviews with coached clients. Three trained role-players presented the same concern to a random sample of the subjects. Subjects were told to act as if this were the fourth session with this client. As the client discussed her concerns with each subject she mentioned at least eight discrepancies (e.g.,"I

just was promoted on the job, but my boss doesn't like me."). A final measure was administered immediately following the completion of the role-play. This measure, the Interview Concerns Questionnaire, was developed for this study to assess the amount of anxiety experienced by subjects during the interview. The instrument was pilot tested and yielded an internal consistency of .76.

Results

The data were analyzed with a multivariate analysis of variance. Table 1 contains the means and standard devistions for each measure in each of the three treatment groups.

Insert Table 1 about here

The results of the multivariate analysis of variance for the first preplanned comparison are found in Table 2. The table presents the comparison between the placebo control group and the combination of the two treatments which received a method to evaluate numerically their confrontations.

Insert Table 2 about here

As is illustrated in Table 2, there was a significant multivariate difference between the combined scores of the two treatments and the control group, F (9,11) = 3.87 , $p <$ .02. Thus, the multivariate analysis indicates that the control group is significantly different from the control group on the package of nine dependent variables.

Since the multivariate test shown in Table 2 is significant, it is relevant to examine the univariate analyses of variance to help explain the obtained multivariate significance. Although there are five of nine univariates that are

significant, two of these are, given the number of repeated tests, very marginal. In summary, the frequencies of confrontation in both the written and the role-played interview formats were higher for the two treatment groups. The modified Carkhuff confrontation scale was also rated higher for the treatment conditions in both the written and interview situations. Finally, in the interview assessment, treatment groups were rated more highly in their average level of difficulty of the expressed confrontations.

The second preplanned comparison for this study was the cognitive self-instructional group versus the discrimination/communication group contrast. The multivariate test of this contrast was significant, F (9, 11) = 4.42, $p < .01$. The two treatments differed on only one of the univariate tests: in the Modified Carkhuff scale measured for the written responses, the discrimination/communication group scored higher than the self-instructional group.

One final analysis was carried out to gain a better understanding of the total extent of confrontation within the two assessments of each group. To obtain this estimate of "overall confrontive impact," the Multidimensional Confrontation Response Scale average was multiplied by the total frequency of confrontation for each subject. Thus a subject who made fifteen low difficulty confrontations may have an approximately equal "overall confrontive impact" to that of the individual who makes five moderately difficult confrontations.

Results of these "confrontive impact" calculations are found in Tables 3 and 4. As is indicated in Table 3, the two treatments have a greater confrontive impact than the control group in both written and interview measures. Also, Table 4 contains data supporting differences in favor of the discrimination/communication group over the self-instructional group in written and interview confrontive impact($\underline{M}_{SI}$ = 15.93, $\underline{M}_{D/C}$ = 29.93).

Insert Tables 3 and 4 about here

Discussion

This study has demonstrated that an advanced facilitative skill such as confrontation can be trained over a relatively short period of time. The design of the study did not allow comparison of a behaviorally-based teaching approach to a no treatment control. However, the "placebo" control group did demonstrate some confrontation behavior during the written and interview assessments. This placebo group received what might be viewed as a "traditional" training program. Essentially, students listened to a lecture describing the confrontive response. This was followed by examples and discussions which helped students label types of confrontation. As students practiced confrontations in role plays, they received feedback from one another and from their group leader on the types of confrontations they had employed. (The analogy is to a counseling training program which describes and labels counseling responses, and, in practicum, students receive feedback describing to them the counseling responses they have used.)

Although it must be identified as an assumption, it seems very unlikely that there would have been more than a very few confrontation responses elicited in an entire group if the concept of confrontation has not been described and demonstrated. Thus, it is believed that even the placebo group performed beyond baseline in use of confrontation.

In terms of the empirical findings of the study, there is evidence that an evaluative component in addition to the description of confrontation does strengthen the subjects' learning. Those two groups which were trained to rate their con-

frontations on a numerial scale outperformed the control group on the package of dependent measures. It is of importance, however, to note that the placebo group does not perform significantly different from the treatments on the Response Relevance Scale, an empathy - related instrument that credits a variety of counseling responses as relevant and facilitative. The confrontation treatment groups, then, were not impeded in the interview assessment from making relevant responses.

Although it had been hypothesized that the cognitive self-instructional modeling group would produce greater frequencies of confrontation and higher confrontation ratings than the discrimination/communication group, such was the case. Learning the thinking process that would lead to a confrontation did not appear to facilitate counselor confrontation. Although these two treatments had essentially the same effect, the discrimination/communication group was consistently, but not significantly, higher in frequency and in ratings than the self-instruction group. This consistency, of course, argues against a nonsignificant hypothesis due to small sample size group. There are at least four possible explanations for the lack of significant differences between these two treatments: (a) the positive effects of having a structured thought process to aid in generating confrontation may be weakened by a relative lack of practice of these self-instructions in a six hour training; (b) the modified Carkhuff confrontation rating scale is simpler to understand and employ than is the Multidimensional Confrontation Response Scale that was discussed with the self-instructional group; (c) the group administration of the treatment, although designed to be as close to an individual presentation as possible, does create an experimental unit problem which could explain differences (or lack of differences) to ideosyncratic group effects; and (d) there may have been differences between group facilitators in their adherence to the training outline.

Since there was only one significant univariate test on the self-instructional vs. discrimination/communication group contrast, an attempt was made to determine at least one possible source of the significant Multivariate effect that had been obtained. Reasoning that the subjects in the self-instructional group may have learned a more complex format for developing and evaluating their confrontation they may have been unable to make as many confrontations as the discrimination/communication group. However, in general, their confrontations may have tended to be rated nearly the same or perhaps higher.

To assess such a hypothesis, a variable combining the frequency and the difficulty level (MCRS) of the confrontations was created by multiplying these two factors. The resulting measure, the "total confrontive impact" variable was calculated separately for the written and interview situations. Contrary to prediction, the discrimination/communication group had significantly more "confrontive impact" during the interview (see Table 4). There were no differences on this measure for the written assessment. Perhaps the relative simplicity of the Carkhuff confrontation scale is more than enough to outweigh any positive effects of the cognitive self-instructional modeling method

The scale of measurement used for rating the confrontation response is, presumably, an important aspect of the training. The Confrontation in Interpersonal Process Scale (CIPS) is relatively easy to score but is difficult to interpret since nearly every counseling response, other than a confrontation, is rated as a 2.0. This factor results in scores that will always be below 3.0 and will inevitably have very little variability across subjects. The meaning of an average CIPS score tells one very little about the confrontation ability of an individual.

On the other hand, the newly developed Multidimensional Confrontation Response Scale (MCRS) was designed to rate only the statements that were confrontations (i.e., statements of discrepancies), and the score represents both the difficulty of the confrontation and the likely impact of that confrontation upon the client. The multidimensional scale rates the "content" of the confrontation (cognition = 1, behavior = 2, affect = 3); the "direction" (inside the counseling relationship =2, outside = 1); and the "time" (present time = 2, past/future = 1). These three ratings are multiplied to give an overall confrontation rating for each response--the range equals 1 to 12. The use of this scale, then, allows for greater discrimination between levels of confrontiveness. This measure, as with the other two scores obtained on both the written and interview assessments, was rated by two judges independently. Interrater reliabilities on the various instruments ranged from .52 for the MCRS in the interview to .90 for the Response Relevance Scale rating on the written responses. These reliabilities averaged .74 with a standard deviation of .14.

In summary, the results of this study support the use of a behavioral teaching approach in the development of the advanced skill of confrontation. Further research, with a larger sample and a more individualized treatment, is needed to determine the best treatment package and the optimal amount of treatment time. Researchers also need to address the integration of the variety of counseling skills that may be learned and practiced separately. For example, what training does the beginner need to distinguish when a confrontation is more appropriate than an empathy response? Such a question is essential for counseling trainers because our students not only need the skills we have taught them, but they also need the ability to discriminate when each skill should be applied.

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Table 1
Means and Standard Deviations for Each Treatment Group on all Dependent Variables

	Placebo Control Group (N=8)		Discrimination/ Communication Group (N=7)		Cognitive Self-Instructional Group (N=7)	
Written Assessment (Counselor Training Questionnaire)	M	SD	M	SD	M	SD
Frequency of Confrontation	5.00	2.33	9.43	1.40	7.43	3.60
Multidimensional Confrontation Response Scale	3.23	1.95	4.16	.75	4.41	1.42
Confrontation in Interpersonal Process Scale	2.56	.38	3.69	.41	2.89	.38
Response Relevance Scale	6.94	1.11	7.43	.48	7.81	.22
Role-played Assessment						
Frequency of Confrontation	1.88	1.25	7.14	5.08	4.28	1.80
Multidimensional Confrontation Response Scale	2.45	1.91	4.71	1.80	4.00	2.00
Confrontation in Interpersonal Process Scale	2.03	.8	2.24	.18	2.13	.19
Response Relevance Scale	6.47	.36	6.38	.59	6.42	.56
Interview Concerns Questionnaire (Anxiety Scale)	3.13	.59	2.65	.53	3.03	.27

Table 2
Multivariate and Univariate Tests of the Combined Treatments vs. Control Comparison

Multivariate Test

$F = 3.87$, , d.f. = 9, 11, $p < .02$

Univariate Tests

	MS	MS Error	df.	F	p <
Written Assessment					
Frequency of Confrontation	59.84	6.71	1,19	8.92	.01
Multidimensional Confrontation Response Scale	5.65	2.22	1,19	2.55	.13
Confrontation in Interpersonal Process Scale	2.67	.15	1,19	17.49	.01
Response Relevance Scale	2.34	.54	1,19	.10	.06
Role-played Assessment					
Frequency of Confrontation	75.04	9.74	1,19	7.70	.02
Multidimensional Confrontation Response Scale	18.51	3.36	1,19	5.15	.04
Confrontation in Interpersonal Process Scale	.12	.02	1,19	4.92	.04
Response Relevance Scale	.02	.26	1,19	4.33	.76
Interview Concerns Questionnaire (Anxiety Scale)	.43	.24	1,19	1.81	.19

Table 3
Analysis of Variance for the Written Assessment
on the "Total Confrontive Impact*" Variable

Source	ss	df	ms	F	p <
Between					
2 Treatments vs. Control	1649.48	1	1649.48	6.82	.02
Self-instruction vs. Disc./Comm.	44.65	1	44.65	.18	.67
Within	4592.70	19	241.72		

*Total Confrontive Impact = frequency of confrontation x average multidimensional confrontation response scale score.

Table 4
Analysis of Variance for the Interview Assessment
on the "Total Confrontive Impact*" Variable

Source	ss	df	ms	F	p <
Between					
2 Treatments vs. Control	1670.78	1	1670.78	11.10	.01
Self-instruction vs. Discrim./Commun.	685.96	1	685.96	4.56	.05
Within	2859.27	19	150.49		

*Total Confrontive Impact = frequency of confrontation x average multidimensional confrontation response scale score

Appendix A

Multidimensional Confrontation Response Scale (MCRS)
By Beck, T.F., Yager, G.G., Seay, T.A., and Wilson, F.R.

A confrontation response may be seen as having 3 dimensions: (a) the content (cognitive, behavioral, or affective), (b) the direction (inside or outside of the counseling session), and (c) the time (past, present or future). The confrontation response may thus be seen as multidimensional. Within each dimension, the focus of the confrontation may vary. The difficulty in performing the confrontation response directly reflects the risk involved in increasing the intensity of the counseling relationship as a result of focusing on different aspects of each dimension.

The greatest risk and the potential for the most intensity in the content dimension is in an effective focus. The next highest degree of risk and intensity involves a content focus on behavior. The least amount of risk and intensity is generated through a focus on cognitions. A focus on affect is thus assigned a score of 3, a focus on behavior is scored a 2, and a focus on cognition is scored a 1.

The second dimension, direction, has two areas of focus: inside versus outside the counseling session. The confrontation is either directed toward information or activity which takes place within the counseling session (between client and counselor) or is aimed at what happens outside the session. Since what happens inside the session entails more risk and engenders greater intensity than what happens outside, the former is weighted more heavily and is assigned a score of 2, while a focus on the latter is scored a 1.

The time dimension in a confrontation response also has two areas of focus: present, or past/future. The confrontation may focus on the present or immediate client or counselor experience, or may focus on events or activities in the past or future, a non-immediate focus. Confrontations dealing with the present are seen as involving more risk and intensity and are thus given a score of 2. A focus on the past or future is seen as less of a risk and less intense, and consequently is assigned a score of 1.

Considering these three dimensions, the least difficult to learn and to demonstrate, the one involving the least risk, and the one with the least potential for increasing the intensity of the interaction between the client and counselor, would include a focus on the clients' thoughts which occurred outside the counseling session, sometime in the past. The most difficult confrontation to learn, and use, the one involving the most risk, and the one with the most potential for increasing intensity, would focus on the clients' or counselors' feelings, and would be directed toward what is happening immediately in the client-counselor relationship.

Definition of Terms

Content Dimension

Affect	the focus is on client or counselor feeling, whether stated directly or implied
Behavior	the focus is on client or counselor activity or behavior, including non-verbal behavior

Cognition	the focus is on client or counselor thoughts, beliefs, expectations, interpretations or meanings

Direction Dimension

Inside	the focus is on any thought, feeling or behavior which relates to the interaction between the client and counselor
Outside	the focus is on the thoughts, feelings, or behaviors of the client which occur outside the counseling relationship

Time Dimension

Present	the focus is on the immediate experience of the client or counselor
Past/Future	the focus is on the non-immediate experience of the client or counselor

A confrontation response generally consists of an identification or description of some aspect of behavior, followed by a statement or question which challenges the client to explore some discrepancy, contradiction, or inconsistency regarding that behavior. It is the second part of the confrontation response which is used as the basis for rating the response. A confrontation ends when a client makes a response after the confrontation. Responses other than confrontations are not scored. The confrontation score for an interview is obtained by dividing the total confrontation score by the number of confrontations in the interview.

Combinations and Scoreing

There are 12 possible combinations of content, direction, and time which may be rated on the confrontation scale. Combined scores are multiplied to account for the differential risk and intensity involved in the confrontation response. The following list includes the 12 combinations with letter symbols for each focus, weighted scores, and a total score for each combination.

	Content	Direction	Time	Symbol	Total
1.	Cognition (C) (1)	Inside (I) (2)	Present (P) (2)	CIP	1x2x2=4
2.	Cognition (C) (1)	Inside (I) (2)	Past/Future (PF)(1)	CIPF	1x2x1=2
3.	Cognition (C) (1)	Outside (0)(1)	Present (P) (2)	COP	1x1x2=2
4.	Cognition (C) (1)	Outside (0)(1)	Past/Future (PF)(1)	COPF	1x1x1=1
5.	Behavior (B) (2)	Inside (I)(2)	Present (P) (2)	BIP	2x2x2=8
6.	Behavior (B) (2)	Inside (I)(2)	Past/Future (PF)(1)	BIPF	2x2x1=4
7.	Behavior (B) (2)	Outside (0)(1)	Present (P) (2)	BOP	2x1x2=4
8.	Behavior (B) (2)	Outside (0)(1)	Past/Future (PF)(1)	BOPF	2x1x1-2
9.	Affect (A) (3)	Inside (I)(2)	Present (P) (2)	AIP	3x2x2=12
10.	Affect (A) (3)	Inside (I)(2)	Past/Future (PF)(I)	AIPF	3x2x1=6
11.	Affect (A) (3)	Outside (0)(1)	Present (P) (2)	AOP	3x1x2=6
12.	Affect (A) (3)	Outside (0)(1)	Past/Future (PF)(1)	AOPF	3x1x1=3

Rules to Aid in Scoring the MCRS

1. Stop the confrontation at the nearest possible point. Ignore other statements or phrases (e.g., reflections, interpretations)
2. Do not rate trailing sentences
3. Rate affect over behavior over cognition when used in combination
4. Rate only counselor and client affect, behavior or cognition - not other people's
5. Rate the second half of the confrontation ... but _____.
6. The contraction "you're" may refer to either present or past affect, behavior, recognition
7. Include a conjunction if needed (e.g., but, yet)
8. Do not make assumptions or read into responses. Take them as they are

Examples

CI. It was nice to have those things happen but neither my boss nor my husband seem to really care. It seems that they're like, they're always yelling at me

Co. It seems like they don't care, that they're always yelling at you, yet you said your boss gave you a raise and your husband has a birthday party for you

COPF 1x1x1=1

Cl. Things are going pretty good.

Co. You know, you're saying that things are going well, but what I sense from your voice is that you're still having some problems. Can we talk about those?

BIP 2x2x2=8

Cl. I tried to study this week but it was too hard. The professors here don't care about the students. It makes me mad that they just put their time in, pick up their checks, and go home. If that's the way they feel then the hell with them, I don't care if I pass or not.

Co. You say you don't really care about your studies, but you seem quite angry about not doing well.

AOP 3x1x2=6